



Building & Planning Department

Contractors Registration Form

Year	2019	Original		Renewal	
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Firm Name	
Address	
City, St Zip	
Contact Name	
Title	

Telephone #		Email:
Emergency #		Cell #

License Type (i.e.;General, Electrical, Concrete, etc.)

Insurance and Bond Requirements (attach current copies)			
General Liability Bodily Injury - \$500,000			
Property Damage			
Lake County Bond \$5,000 (copy of recorded bond required)			

Office Use Only			
Registration#		# for last year	
Date Submitted		Processed by	

Fee: Original \$ 75.00; Renewal \$ 50.00

St. John Municipal Building
 10955 West 93rd Avenue
 St. John, Indiana 46373-8822
 (219) 365-5301 Voice
 (219) 558-2082 Facsimile
www.stjohnin.com